| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | MW | | 07-18-01 |
| O.I.P.E. CLASSIFIER | A-S&J | 943 | 7-26-04 |
| FORMALITY REVIEW | | | 8-29-1 |
| RESPONSE FORMALITY REVIEW | M.D | 825 | 12/06/01 |
| | M.D | 015 | 01-14-02 |

## INDEX OF CLAIMS

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| ✔ | ................................. Rejected | | N | ............................... Non-elected |
| = | ................................. Allowed | | I | ............................... Interference |
| − | (Through numeral)... Canceled | | A | ............................... Appeal |
| ÷ | ................................. Restricted | | O | ............................... Objected |

| Claim | | Date |
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| Final | Original 2/7/01 | |
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| Claim | | Date |
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| Final | Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

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